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## **BIB DATA SHEET**

## **CONFIRMATION NO. 3993**

|                                                                                                                                                                                        |                                                                                                 | T    |   | r    | · · · · · · · · · · · · · · · · · · · | r                                     |                     |                 | T      | · · · · · · · · · · · · · · · · · · · |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|------|---|------|---------------------------------------|---------------------------------------|---------------------|-----------------|--------|---------------------------------------|
| SERIAL NUM                                                                                                                                                                             | AL NUMBER FILING O                                                                              |      |   |      | GRO                                   | GROUP ART UNIT                        |                     | ATTORNEY DOCKET |        |                                       |
| 10/509,67                                                                                                                                                                              | 10/509,677 10/08/2                                                                              |      | - |      | 348                                   | 2622                                  |                     |                 | P26092 |                                       |
|                                                                                                                                                                                        |                                                                                                 | RULE |   |      |                                       | -                                     |                     |                 |        |                                       |
| APPLICANTS Mitsuhiro Kasahara, Osaka, JAPAN; Tomoaki Daigi, Osaka, JAPAN; Hideaki Kawamura, Moriyama-shi, Shiga, JAPAN; Hideto Nakahigashi, Osaka, JAPAN; Tomoko Morita, Osaka, JAPAN; |                                                                                                 |      |   |      |                                       |                                       |                     |                 |        |                                       |
| ** CONTINUING DATA **********************************                                                                                                                                  |                                                                                                 |      |   |      |                                       |                                       |                     |                 |        |                                       |
| ** CONTINUING DATA **********************************                                                                                                                                  |                                                                                                 |      |   |      |                                       |                                       |                     |                 |        |                                       |
| ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **                                                                                                                                      |                                                                                                 |      |   |      |                                       |                                       |                     |                 |        |                                       |
| Foreign Priority claimed Yes No                                                                                                                                                        |                                                                                                 |      |   |      | STATE OR COUNTRY                      | 1 -                                   | IEETS<br>WINGS      | TOT             |        | INDEPENDENT<br>CLAIMS                 |
| 35 USC 119(a-d) conditions met  Yes  No  Wet after Allowance  Verified and  Acknowledged  Examiner's Signature  Initials .                                                             |                                                                                                 |      |   | ance | JAPAN                                 | DKA                                   | 17                  |                 |        | 2                                     |
| ADDRESS                                                                                                                                                                                |                                                                                                 |      |   |      |                                       |                                       |                     |                 |        |                                       |
| GREENBLUM & BERNSTEIN, P.L.C. 1950 ROLAND CLARKE PLACE RESTON, VA 20191 UNITED STATES                                                                                                  |                                                                                                 |      |   |      |                                       |                                       |                     |                 |        |                                       |
| TITLE                                                                                                                                                                                  |                                                                                                 |      |   |      |                                       |                                       |                     |                 |        |                                       |
| Image conversion device and image conversion method                                                                                                                                    |                                                                                                 |      |   |      |                                       |                                       |                     |                 |        |                                       |
|                                                                                                                                                                                        | FEES: Authority has been given in Paper  No to charge/credit DEPOSIT ACCOUNT  No for following: |      |   |      |                                       | ☐ All Fees                            |                     |                 |        |                                       |
|                                                                                                                                                                                        |                                                                                                 |      |   |      |                                       | ☐ 1.16 Fees (Filing)                  |                     |                 |        |                                       |
| FILING FEE<br>RECEIVED<br>950                                                                                                                                                          |                                                                                                 |      |   |      |                                       | ☐ 1.17 Fees (Processing Ext. of time) |                     |                 |        |                                       |
|                                                                                                                                                                                        |                                                                                                 |      |   |      |                                       |                                       | ☐ 1.18 Fees (Issue) |                 |        |                                       |
|                                                                                                                                                                                        |                                                                                                 |      |   |      |                                       | Other                                 |                     |                 |        |                                       |
|                                                                                                                                                                                        |                                                                                                 |      |   |      |                                       |                                       | ☐ Credit            |                 |        |                                       |
| -                                                                                                                                                                                      | •                                                                                               |      |   |      | <del></del>                           |                                       |                     |                 |        | <del></del>                           |